H-4312.1			

## HOUSE BILL 3042

State of Washington 59th Legislature 2006 Regular Session

By Representatives Green, Conway, Simpson, Williams, Morrell and Hasegawa

Read first time 01/18/2006. Referred to Committee on Commerce & Labor.

AN ACT Relating to industrial insurance compensation for medical or surgical treatment proven to be effective; and adding new sections to chapter 51.36 RCW.

4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

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- 5 <u>NEW SECTION.</u> **Sec. 1.** A new section is added to chapter 51.36 RCW 6 to read as follows:
  - (1) If the department has made a medical coverage decision denying the request of a worker entitled to benefits under this title for coverage of a particular medical or surgical treatment under RCW 51.36.010 and the worker subsequently receives the medical or surgical treatment at personal expense, by using private insurance, or by using any other means, the department or self-insurer, as the case may be, shall reimburse the payor for the cost of the medical or surgical treatment and shall pay the treating provider any remaining balance, unpaid by the worker, if the worker has provided:
- 16 (a) Adequate documentation of the medical or surgical treatment 17 performed for a condition accepted by the department or self-insurer, 18 as the case may be; and

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1 (b) Medical evidence that shows that his or her condition has 2 reasonably improved after the medical or surgical treatment is 3 completed.

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- (2) In the case of a worker insured by the department, payment under subsection (1) of this section shall be paid out of the medical aid fund.
- 7 (3) In the case of a worker of a self-insurer, payment under 8 subsection (1) of this section shall be paid by the self-insurer.
- 9 (4) All payments under subsection (1) of this section must be made 10 within thirty days of receiving adequate documentation from the worker.
- 11 (5) Upon successful appeal by the department or self-insurer, the 12 worker must return all reimbursed medical expenses to the department or 13 self-insurer.
- 14 (6) This section applies prospectively to all claims regardless of 15 the date of injury.
- NEW SECTION. Sec. 2. A new section is added to chapter 51.36 RCW to read as follows:
  - (1) Upon request of the treating provider, the department must authorize coverage for a test on an individual worker entitled to benefits under this title of a medical or surgical treatment approved by the United States food and drug administration and considered the standard of care throughout the medical community.
  - (2) If, after conducting the test under subsection (1) of this section, the treating provider finds individual success in curing or relieving the symptoms of the individual worker entitled to benefits under this title, the department shall authorize coverage for full treatment.
- 28 (3) This section applies prospectively to all claims regardless of 29 the date of injury.

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